Medical Schools of the West

Oregon Health Sciences University School of Medicine Celebrates Centennial

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One of a continuing series of reports from the medical schools of the West

Just 100 years ago this fall, the inaugural class of the University of Oregon Medical School gathered for the first time in the school's lone building—a two-room converted grocery store in northwest Portland. Eight practicing physicians lectured part-time for little or no money. In all, 18 men attended classes in its one lecture room; cadavers were hauled through a trapdoor to the dissecting room above with a block and tackle.

Today that school's direct descendant, the Oregon Health Sciences University (OHSU) School of Medicine, is an integral part of a \$200 million, 26-building academic health complex that includes schools of Dentistry and Nursing, University Hospital, Doernbecher Children's Hospital, University Clinics (medical and dental), a Crippled Children's Division and a new research unit—the Vollum Institute for Advanced Biomedical Research.

Now located on a hilltop site, the campus overlooks the city of Portland. The school's student body has grown to 500—with this year's entering class nearly 50% female. Faculty members now number 500, with more than 1,000 practicing clinicians who serve as volunteer faculty members.

In 1887 admission to the school required knowledge of the "common English branches, including reading, writing, spelling, grammar, geography, arithmetic and so forth." Today it involves at least three years of premedical study, entrance examinations, proof of character and personal interviews.

Training in 1887 lasted two years and had to include "two full courses of lectures and at least one course of practical anatomy and clinical instruction." Today the curriculum includes subjects such as medical genetics, immunology, microbiology and radiographic diagnosis. Under consideration are core courses that reflect societal concerns such as occupational diseases, medical ethics and a growing geriatric population.

In 1887 medical research in Oregon did not exist in the modern sense. Bacteriology was just emerging as a field of medical instruction when the school was founded, and, until 1892, microscopes in the medical school lacked an oil immersion lens.

The OHSU School of Medicine today boasts spacious laboratories, the most advanced equipment and a vital re-

search program. Here, too, tomorrow's biomedical researchers can pursue master of sciences and doctoral degrees in anatomy, biochemistry, medical genetics, medical psychology, microbiology, pathology, pharmacology and physiology. Also available are baccalaureate and master's degree programs in medical technology and allied health programs in advanced paramedics, dietetics, nuclear medicine, radiation therapy, x-ray and ultrasound technology and alcohol counseling.

In education, patient care, public service and research, the OHSU School of Medicine has made enormous strides in 100 years. The story behind its evolution is one of men and women dedicated to improving the quality of medical education and health care in Oregon.

Willamette Medical Department

The mid-19th century found Oregon without enough well-trained physicians to meet the needs of a rapidly growing population. So members of the medical department at Willamette University in Salem, a private institution, began the state's first formal medical education program in 1867. The department relocated to Portland in 1878, where classes were held in a few rented rooms above a livery stable. Admission requirements consisted of little more than possession of a "good English education."

Eight years later the department expanded, moving to an elaborate Victorian building that contained a 150-seat auditorium, a dissecting room with 20 tables and a refrigerator large enough to store 30 cadavers (Figure 1). But classes no sooner began when four physicians resigned to protest a faculty reorganization and the appointment of a new chair of obstetrics. The four dissenters and four other local physicians were granted a charter in June 1887 by the Board of Regents of the University of Oregon to open a state medical school in Portland, the forerunner of OHSU's School of Medicine.

The First Quarter Century

Simeon E. Josephi, MD, one of the four dissenters, was elected first dean of the new medical school. A graduate of Toland Medical School in San Francisco, Dr Josephi specialized in obstetrics and diseases of the mind and nervous system. He was described by a contemporary as a "good"

looking man of about ordinary height, of graceful form and figure, jet black hair and whiskers, with mild brown eyes, a pleasant voice and suave manner, a good talker, intelligent, with quick perceptive faculties, always faultlessly dressed"—invaluable attributes for the man who would guide the fledgling school through its first critical quarter century.

Classes began in the fall of 1887 in a former grocery store on the Good Samaritan Hospital grounds in northwest Portland. Coursework included lessons in microscopy, histology and physiology, but the first actual laboratory class in bacteriology was not held until 1892, when Dr A. E. Mackay displayed the first tuberculosis bacillus seen under a microscope in the Pacific Northwest.

By 1898, when the school adopted the requirements of the Association of American Medical Colleges, the course of study had been lengthened to four years and studies were being graded. A knowledge of physics and elementary Latin was required for admission. Laboratory work was required but, except for some microscopes, equipment was lacking (Figure 2). Lectures were sporadic as many instructors understandably tended first to their private practices. Aside from a small amount from the state, school revenues were derived almost exclusively from student fees, which were insufficient to pay staff and acquire books and laboratory equipment. At the close of 1900, the school had a surplus of \$4,154.36 from receipts of \$7,171. The surplus was distributed among 25 lecturers who had given 932 lectures, so they received less than \$5 per lecture.

In 1905 the American Medical Association raised its teaching and equipment standards for medical schools, but inadequate funding prevented the dean from meeting these demands and the school's closure seemed imminent. A desperate faculty appealed to the University of Oregon's Board of Regents. It paid off. The board increased the school's annual appropriation from \$1,000 to \$2,500.

Bolstered by increased financial support, the school appointed its first full-time instructor. At a conference in Chicago on medical education in 1910, it was included in the

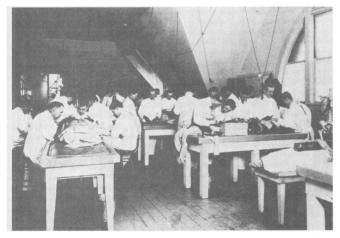


Figure 1.—Although admission requirements and curriculum have changed dramatically, education has been the Oregon Health Sciences University School of Medicine's primary mission since the school began in 1887. Medical students in the late 1800s were required to attend two courses of lectures and at least one course of practical anatomy (shown above in a circa 1920 photo) and clinical instruction. Above is the anatomy laboratory of the medical school when it was located at 23rd and Lovejoy Streets of Portland in the late 1800s.

list of class A institutions. By 1912, the medical school had a full-time laboratory staff and a dispensary organized for the instruction of students (Figures 3 and 4).

'Mackenzie's Folly'

Dean Josephi was succeeded in 1912 by another of the school's founders, Kenneth J. Mackenzie, MD. The new dean was vigorous, forceful, one of the best known physicians in the region and chief surgeon of the Oregon Railway and Navigation Company. He realized that the school needed larger quarters and better equipped laboratories. Dean Mackenzie envisioned a thriving medical center away from the city's noise and grime, and he found a way to do it—he persuaded the Oregon Railway and Navigation Company to donate to the school 20 acres of land on Marquam Hill, the site of the present-day campus (Figure 5).

Building a medical school accessible only by a winding wagon road and situated a mile and a half from the center of the city was daring, and the school was often referred to as "Mackenzie's Folly." But the dean worked unceasingly to develop his folly into a first-rate medical education center.

The railroad's donation of land in 1914 was followed by

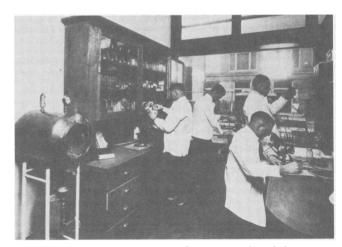


Figure 2.—In 1887 physicians in Oregon were largely borrowers of medical knowledge. Laboratories existed in the crude sense, as seen above, but with the development of laboratory science in the late 1800s, research mushroomed and the School of Medicine has been at the forefront of many medical advances.



Figure 3.—Pictured in the photo is the physiology laboratory of the Oregon Health Sciences University School of Medicine in the north attic on Lovejoy Street as it appeared in 1912. The beginnings of the library can be seen in the background.

a legislative appropriation of \$50,000 for construction of a three-story Medical Science Building, now called Mackenzie Hall, that was completed in 1919. The first class on the hill included 50 students, mostly ex-servicemen, and 10 full-time faculty members.

At the same time, a new county hospital was urgently needed to replace the one located in Portland. Knowing that clinical facilities adjacent to the school would benefit the students, Dean Mackenzie offered nine acres on campus for a general charity county hospital and nurses' dormitory. The Multnomah County commissioners accepted the offer and agreed to an affiliation between the hospital and the medical school for clinical teaching. Construction of the new Multnomah County Hospital on Marquam Hill was well under way when the dean died suddenly in 1920.

Entering the Modern Age

The new dean, Richard B. Dillehunt, MD, shared Mackenzie's vision of a modern medical education center. Af-

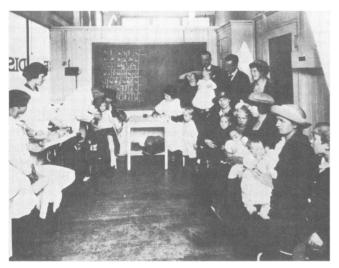


Figure 4.—Caring for patients has been a critical aspect of educating tomorrow's physicians. Higher standards for patient care led to improved patient care facilities for students. In 1909 arrangements were made to use the Multnomah County Hospital for teaching purposes, and in 1910 the school became affiliated with its first outpatient facility, the People's Institute and Free Dispensary in downtown Portland.



Figure 5.—A parcel of 20 acres of land was donated in 1914 on Marquam Hill, the site of the present-day Oregon Health Sciences University campus. Construction of the three-story Medical Science Building in the photograph was completed in 1919. There were 50 students, mostly ex-servicemen, in that first class on the hill, and 10 full-time faculty members.

fectionately known as "Dilly," the dean was chief surgeon of the Shriners' Hospital for Crippled Children for 19 years. A contemporary said of Dean Dillehunt, "Children are not abashed by the great height and quite noble girth that encase his voice. He may not utterly hate being complimented, but his remark on these occasions is, 'Oh yes, isn't it nice to be nice?"

In 1924, an additional 88 acres of adjoining land was donated to the campus by a Portland family, 25 acres of it being deeded to the United States government as a site for a veterans' hospital. In 1926 the original 70-bed Doernbecher Children's Hospital, now part of the Outpatient Clinic, was completed. A gift of \$400,000 from the General Education Board of New York in 1931 made possible a modern outpatient clinic on campus that improved both patient care and the quality of education. The following year, the University of Oregon's nursing program was transferred to the medical school as the Department of Nursing Education (Figure 6).

Research took on added significance during Dean Dillehunt's tenure. A faculty member wrote in 1924 that "our medical school is known and will be known by the research that comes from it." Medical school researchers studied the nervous system, intestinal obstruction, heart disease, the relation between infection of the gallbladder and pernicious anemia and the "increasing predominance of goiter among the people of the Pacific Northwest." One physician noted in 1925 that autopsy studies showed "a much greater frequency of coronary obstruction than has hitherto been imagined" (Figure 7).

But library facilities were "fast falling short of the research pace," according to one faculty member. "As our library is limited, so will research be handicapped."

As late as 1918 books were stored in a locked room the size of a closet, to which only the janitor had the key. Larger quarters became available in 1922 with completion of the main unit of the medical school building. The state legislature in 1929 required that a portion of physicians' annual registration fees be provided to the library, supplementing its regular budget. In 1939 the medical school library and auditorium were completed.

Ill health forced Dean Dillehunt into semiretirement in 1943, and David W. E. Baird, MD, was appointed to take his place.

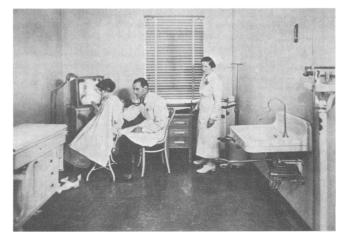


Figure 6.—Physicians in 1920 used the x-ray viewer (far left corner) when diagnosing patients' disorders.

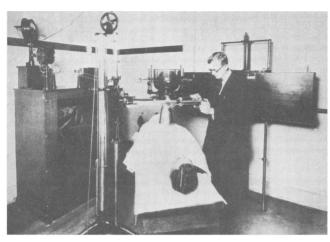


Figure 7.—Physicians in the early 1900s did not have the benefit of today's computed tomographic scanner and ultrasound for diagnostic purposes.

Continued Growth

Dean Baird, a graduate of the University of Oregon Medical School, had been an internist in private practice with years of experience as a hospital administrator, teacher and researcher. Again, updating and expansion of the school was necessary. The availability of state funds after World War II helped to replace worn-out research and clinical equipment with new and modern equipment. During this time, the number of faculty increased from 10 in the 1920s to 125 in the 1950s.

In 1949, Baird Hall was built to house basic science departments and administrative offices. The Crippled Children's Division, which today provides diagnosis, treatment and rehabilitation for handicapped people throughout the state, was built in 1954.

A top priority was the medical school's need for its own teaching hospital where educational and research activities could be integrated with patient care. This need was met in 1955 when a 14-story Medical School Teaching Hospital was built into a ravine on the south side of the hill. It quickly became the school's main clinical teaching facility. In 1956, Doernbecher Memorial Hospital for Children moved into its current location on the top two floors of the medical school hospital. Today Doernbecher contains both a neonatal intensive care center and a newly remodeled pediatric intensive care center.

The University of Oregon School of Dentistry joined the burgeoning campus when the building to house it was completed in 1956; in 1960 the Department of Nursing Education became the University of Oregon School of Nursing. The nursing school, administered by its own dean, remained a part of the School of Medicine until 1974 when it was established as a separate school.

The 1960s brought continued growth. The Medical Research Building was built, the emergency department renovated and the library expanded. A six-story addition that included a 20-bed psychiatric crisis unit and seven state-of-the-art operating rooms was added to the county hospital.

Dean Baird was succeeded in 1968 by Dr Charles N. Holman, who served as dean for seven years. As medical student, resident in internal medicine, teacher and hospital



Figure 8.—Today the School of Medicine is part of the \$200 million, 26-building Oregon Health Sciences University. Now located on a 116-acre hilltop, the campus overlooks the city of Portland, with Mount Hood in the background.

administrator, Dr Holman's association with the medical school spanned 36 years. Holman took over the helm at a time when many were asking, "What ails medical schools?"

The new dean recognized that the medical school needed to turn out more physicians, nurses and medical technologists at a time when potential students were more attracted to nonmedical degrees. Again, more room was needed. "We now are training 92 entering medical students in the space designed for 72," he noted. Things improved with construction of the seven-story Basic Science Building in 1972. Today it houses School of Medicine student classrooms, laboratories and offices. Also in 1972, a nine-story wing was added to the teaching hospital to house modern surgical and therapeutic radiologic facilities.

New clinical programs were also instituted under Dean Holman's leadership: a residency in family practice, a prenatal emergency transport system, the Oregon Eye Bank, the Oregon Kidney Donor Program and the Rosenfeld Center for the Study and Treatment of Child Abuse. Outpatient services were expanded to include dozens of general and specialty clinics in such fields as dermatology, family medicine, pediatrics, obstetrics and gynecology, ophthalmology and psychiatry. Today about 135,000 outpatient visits and 22,000 emergency visits are recorded each year.

The years 1973-1974 brought major changes to the campus on Marquam Hill. In 1973, the School of Medicine acquired the county hospital, renaming it University Hospital north; the Medical School Teaching Hospital became University Hospital south.

In 1974, the University of Oregon Health Sciences Center was "founded." The medical school, along with the schools of dentistry and nursing, University Hospital, University Clinics and the Crippled Children's Division, became one free-standing institution totally independent of the University of Oregon (Figure 8). This independence was clarified in 1981 when the health center was renamed the Oregon Health Sciences University.

The first president of the new health center was Lewis W. Bluemle, Jr, MD, who had been president of Upstate Medical Center, State University of New York. Along with the institution's status as a health sciences center came the



Figure 9.—The photograph shows an aerial view of the Oregon Health Sciences University campus in 1986. The crane in the left corner depicts early construction of the Vollum Institute for Advanced Biomedical Research.

authority—previously held by the University of Oregon—to grant degrees to its students.

Guiding the medical school through this period of transition was Dr Robert Stone, a pathologist and graduate of the State University of New York College of Medicine in Brooklyn. Dr Stone was the first dean to be appointed from outside the ranks of the medical school faculty.

Dr Stone was succeeded in 1979 by Ransom Arthur, MD, who is credited with preserving the quality of the medical school program during a period of fiscal constraints. Dean Arthur, a psychiatrist and graduate cum laude from Harvard Medical School, was a strong promoter of research programs and was responsible for attracting several young medical investigators to the university. Since his departure in 1982, Arthur has been remembered by colleagues as a problem-solver and as a man of patience and understanding who had the ability to counsel department chairs and faculty members.

Leading the School of Medicine into its second hundred years is John Kendall, MD. Appointed dean in 1983, Kendall earned his medical degree at the University of Washington School of Medicine, Seattle, has worked extensively in neuroendocrinology and has established a national reputation in academic medicine over the past two decades.

As a former administrator at the Veterans Administration (VA) Medical Center, Dean Kendall is credited with building the Portland VA's research program into one of the major national centers of the VA research system. Under his leadership, the Portland VA increased its annual federal research support from \$100,000 to \$2 million in areas such as cell biology, immunology, molecular oncology, regeneration and health services research.

The year of Dean Kendall's appointment coincided with the arrival on the hill of the Shriners' Hospital for Crippled Children. Built adjacent to University Hospital north, the 39-bed facility serves as a teaching and research affiliate for the School of Medicine. And currently under way is a multimillion-dollar renovation of hospital facilities and construction of a new 420-space parking structure.

The Next Hundred Years

As a vital component of the OHSU, the School of Medicine is benefiting from the many new developments on Marquam Hill that are taking shape under the leadership of Dr Leonard Laster, OHSU president. Dr Laster came to the OHSU in 1978 with a new vision—one calling for new centers of excellence, a "critical mass" of researchers and health care professionals and a growing partnership of public and private support.

Today his vision is becoming a reality. For example, the Vollum Institute for Advanced Biomedical Research, completed this year, is applying molecular biology to the study of the brain and nervous system. Its 86,000 square feet distributed over five stories (Figure 9) provides an environment for the exchange of ideas and creative research among the scientists and staff who are working there. The institute has attracted scientists from the Massachusetts Institute of Technology, Yale, Stanford, Harvard, Columbia and other leading universities.

To keep pace with the rapid flow of information, the Biomedical Information and Communications Center, now in the planning stage, will serve as a model information center by using the latest technology to quickly bring vital medical data and information to health care professionals throughout the state.

Also in the planning stages is an \$18.5 million regional eye center where basic scientists and clinicians in ophthalmology will work closely in developing new techniques to prevent and treat diseases of the eye. The recently funded Center for Occupational Disease Research is the only one of its kind in the United States that will use molecular biology to investigate damage to the nervous system caused by exposure to toxins in the workplace. The Oregon Hearing Research Center was recently funded with a \$4.7 million federal appropriation; and, in the future, the OHSU hopes to create a center for the study of aging and a center for the application of advanced biomedical technology to clinical practice.

The philosopher Thomas Carlyle once wrote, "Nothing that was worthy in the past departs." What was worthy in the OHSU School of Medicine's past remains with us in this centennial year: a steadfast commitment to excellence, quality and compassion in the healing arts.